

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>JB</i>	<i>2000</i>	<i>3-1-60</i>
O.I.P.E. CLASSIFIER	<i>R</i>	<i>5</i>	<i>3-14-60</i>
FORMALITY REVIEW		<i>71531</i>	<i>4-17-60</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 +/- ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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APPLICANTS

TITLE